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PTQ/3D/22 (07-09) Approved for use through 07/31/2012, OMD 0651-0031 U.S. Pater1 and Trademark Office; U.S. DEPARMENT OF COMMERCE

Under the paperwisk Reduction Act of 1995, no persons are required to respond to a collection of information unloss it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional)		
FY 2009		IT-03-005		
(Fees pursuant to the Consolidated Appropriate	ions Act, 2005 (H.R. 4818).)	11 00 003	·	
Application Number 10/675,684		Filed 09/30/2003		
For SYSTEM & METHOD FOR SOFTW	VARE SITE LICENSING		•	
Art Unit 3685		Examiner WORJL	Examiner WORJLOH	
This is a request under the provisions of 37 CF application.	FR 1.136(a) to extend the per	riod for filing a reply in f	he above identified	
The requested extension and fee are as follow	s (check time period desired	and enter the appropri	ate fee below):	
	<u>Fee</u>	Small Entity Fee		
One month (37 CFR 1.17(a)(1))	\$130	\$65	\$ <u>130</u>	
Two months (37 CFR 1.17(a)(2))	\$490	\$24 5	\$	
Three months (37 CFR 1.17(a)(3)) . \$1110	\$ 555	\$	
Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$	
Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$	
Applicant claims small entity status. See 3	7 CFR 1.27.			
A check in the amount of the fee is en	closed.			
Payment by credit card. Form PTO-20	38 is attached.			
The Director has already been authori	zed to charge focs in this	application to a Depo	osit Account.	
The Director is horeby authorized to c Deposit Account Number 502721	harge any fees which may	be required, or cred	it any overpayment, to	
WARNING: Information on this form may bee Provide credit card information and authorize	come public. Credit card infon ation on PTO-2038.	mation should not be inc	cluded on this form.	
I am the applicant/inventor.				
	e entire interest. See 37 C			
	CFR 3.73(b) is enclosed (ord. Registration Number,	•		
	-			
attorney or agent under Registration number if act	ing under 37 CFR 1.34			
Muchelle which	don	JANUARY 26	5, 2011	
Signalure C			Date	
MICHELLE WHITTINGTON		480-961-9000 X21352		
Typed or printed name		Telepi	hono Number	
NOTE: Signatures of all the inventors or assignous of record	of the entire interest or their represe	ntative(s) are required. Subm	It multiple forms if more than on	
signature is required, see balow.				

compose, increasing parameter, in specific parameters of the control of the contr If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2. 10675684

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